PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

915-007.037

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
ТО	TAL CLAIMS		23				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		B	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			2_3minus 20=		٠ 2			X\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS			∼minus 3 =		*0			X42≈		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	" "0" in c	'0" in column 2		TOTAL		OR	TOTAL	804
CLAIMS AS AMENDED - PART II								1		•	OTHER	
		(Column 1)	(Columi			(Column 3)		SMALL ENTITY		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≃	
AME	Independent	*	Minus	***	- OL - 111			X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM			+140=		OR	+280=	
								TOTAL DDIT. FEE			TOTAL	
	(Column 1) (Column 2) (Column 3)									1	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	HEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1 -	.140			+280=	
								+140=		OR	+280=	
										OR	ADDIT. FEE	
(Column 1) (Column 2) (Column CLAIMS HIGHEST										ı 1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Ιſ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	<u> </u>
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT						』├	7,12-		OR		
* If the entry in column 1 is less than the entry in column 2 write "0" in column 3										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	•	imber Previously P nher Previously Pa					er foun	id in the and	oropriate bo	x in co	luma 1.	